

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S.2	52	05/30/01
O.I.P.E. CLASSIFIER			6/11
FORMALITY REVIEW	E.A.	1082	07/24/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral)... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

Claim		Date			
Final	Original				
1	✓	✓	✓	✓	✓
2	✓	✓	✓	✓	✓
3	✓	✓	✓	✓	✓
4	✓	✓	✓	✓	✓
5	✓	✓	✓	✓	✓
6	✓	✓	✓	✓	✓
7	✓	✓	✓	✓	✓
8	✓	✓	✓	✓	✓
9	✓	✓	✓	✓	✓
10	✓	✓	✓	✓	✓
11	✓	✓	✓	✓	✓
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46	✓	✓	✓	✓	✓
47	✓	✓	✓	✓	✓
48	✓	✓	✓	✓	✓
49	✓	✓	✓	✓	✓
50	✓	✓	✓	✓	✓

Claim		Date			
Final	Original				
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Claim		Date			
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If more than 150 claims or 10 actions  
staple additional sheet here

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Best Available Copy